

WENDE (G. W.)

*A case of Rhinoscleroma
originating in the United States.*



A CASE OF RHINOSCLEROMA ORIGINATING IN THE UNITED STATES.

By GROVER WILLIAM WENDE, M. D.,

Clinical Instructor in the Diseases of the Skin, University of Buffalo.

CHAS. B., whose case is here reported, is of American parentage and a resident of Buffalo, where he was born, which place he never left except on one occasion, when I presented him before the New York Dermatological Society, December 18, 1895. He is eleven years of age, and is apparently strong and robust. His family history is exceptionally good, exclusive of the mother, who died at the age of thirty-three, during pregnancy. His grandparents were noted for their remarkable longevity, his paternal grandfather having attained the age of ninety, and his paternal grandmother having exceeded the age of one hundred and one years; while on the maternal side their respective ages were eighty and seventy-eight.

The father, a locomotive engineer, is forty-four years old, and is seemingly a typical specimen of health and strength. The patient has two brothers, aged respectively seventeen and eighteen, who have always enjoyed the best of health. It was ascertained upon inquiry that the disease from which the patient was suffering had existed in a less marked degree for about a year and a half, and was progressive in its nature.

The patient disclaimed all knowledge of any injury or of exposure to irritating influences of any description. His father was the first to observe the change in the normal skin, consisting of a pink spot slightly raised, below the right naris. There was no pain. At the expiration of three months a perceptible elevation appeared, the beginning of what soon developed into a pronounced ridge. These manifestations—the spot and the ridge—were joined at their margins near their respective centers.

As time went on, the ridge assumed greater proportions, and finally extended to the left side of the nose. My first examination revealed a nodule, irregular in outline, just below the right naris, as seen por-



trayed in the accompanying illustration (Fig. 1), which was removed some time in August for a microscopical examination.

The character of the nodule was quite superficial, while the tissue beneath was infiltrated and very hard. Upon the right side of the nose two sharply defined ridges were seen, each measuring about an



FIG. 1.

inch and three quarters in length, having between them a small area of unaffected skin.

The upper one was the least pronounced and was of uneven width. The left side of the nose showed but one ridge, which had a uniform width of nearly half an inch. These ridges, which were exceedingly pronounced and indurated, united upon the bridge of the nose (Fig. 2).

The right ala was uniformly thickened, causing a narrowing of the corresponding lumen of the nostril. The left ala, at this time, was not involved. The lines of demarcation between these lesions and the healthy skin were abrupt.

In considering the diagnosis, we may readily eliminate rhinophyma, tubercular lepra, tubercular lupus, keloid, epithelioma, and sarcoma by the process of exclusion. That this is not a case of syphilis has been



FIG. 2.

demonstrated by the fact that one year's thorough antisiphilitic treatment proved unavailing. The disfiguring growth, its glossy appearance and localization, its origin from the nasal mucous membrane—later, its encroachment upon the lower part of the naris, its extension backward in the nasal cavity to the posterior nares, its gradual development without disintegration, its peculiar hardness and elasticity, its extension to the upper lip with a sharp border, and its regeneration of

the excised portions—all this has led me to conclude that my patient is afflicted with rhinoscleroma.

The case is one of unusual interest, not alone for its rarity, but from the fact that, so far as records show, this is its first appearance in a person born in the United States. The result of this bacteriological investigation of this case is still in doubt, and when completed it will be made known in a future number of this JOURNAL.



